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## **UTILITY PATENT APPLICATION TRANSMITTAL**

Attorr	ney Docket No.	WLI 1012 PUS	3
First I	nventor	Morrow, et al	5
Title	LACROSSE GOA	LIE STICK HEAD	1

provisional applications under 37 CFR 1.53(b)) | Express Mail Lahel No. | EL596484522US

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APPLICA	TION ELEMENTS	A	DDRESS TO:	Box Pat	ent Applica	tion	
	erning utility patent application conten	its.			gton, DC 20		
	orm (e.g., PTO/SB/17) luplicate for fee processing)	7	The second secon			ge table or	
2 Applicant claims sr		8	Computer Program ( <i>Appendix</i> )  8. Nucleotide and/or Amino Acid Sequence Submission				
See 37 CFR 1.27.  Specification	[Total Pages 14]		(if applicable, all nece		orm (CDE)		
3. (preferred arrangement	set forth below)		a. Computer Re		, ,		
	e to Related Applications		b. Specification Sequ		•		
	rding Fed sponsored R & D quence listing, a table,		i.□ CD-ROM	or CD-R	(2 copies);	or	
	rogram listing appendix		ii.□ paper				
- Background of t	he Invention	_	c. Statements v	erifying i	dentity of al	bove copies	
- Brief Summary - Brief Description	of the Invention n of the Drawings ( <i>if filed</i> )	L	ACCOMPANYI	NG AP	PLICATI	ON PARTS	
<ul> <li>Detailed Descrip</li> </ul>			9. Assignment P	apers (co	over sheet &	& document(s))	
<ul><li>Claim(s)</li><li>Abstract of the I</li></ul>	Disclosura		37 CFR 3.73(			Power of	
- Abstract of the i	Disclosure		(when there is		,	→ Attorney	
4. + Drawing(s) (35 U.	S.C. 113) [ Total Sheets 2 ]		11. English Trans		`	appiicable)  ☐ Copies of IDS	
5. Oath or Declaration	[ Total Pages]		12. Statement (IE			Citations	
a. Newly execu	ted (original or copy) prior application (37 CFR 1.63 (d))		13. Preliminary A	mendme	ent		
b. (for continuat	ion/divisional with Box 17 completed)		14. Return Recei			503)	
	ON OF INVENTOR(S)		15. Certified Con (if foreign pri			ent(s)	
	ement attached deleting inventor(s) ne prior application, see 37 CFR		40	ority is cl	aimed)		
	and 1,33(b).		Outer				
	Sheet. See 37 CFR 1.76					. , ,	
or in an Application Data She	CATION, check appropriate box, and a et under 37 CFR 1.76:	supply the	requisite information b	eiow and	ın a preiim	inary amenament,	
Continuation	Divisional Continuation-in-part (C	IP)	of prior application No		/		
Prior application information	Examıner		Group / Art Unit				
	ONAL APPS only: The entire disclosure the disclosure of the accompanying con						
	relied upon when a portion has been ina					rated by reference.	
	18. CORRESPO	NDENCE	ADDRESS				
Customer Number or Bar Code Label  (Insert Customer No. or Attach bar code label here)  Or Correspondence address below							
Name	John S. Artz						
	28333 Telegraph Road, Ste. 250						
Address						<b>†</b>	
City	Southfield	State	e MI	, , , , ,	Zip Code	48304	
Country	United States	Telephor	ne 248-223-9500		Fax	248-223-9522	
	Jahan C. Auto					36,431	
Name (Print/Type)	John S Artz		Registration No. (Att	orney/A	gone		
Signature	John S. Ort	4		L D	ate 4/18/0	01	

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## **FEE TRANSMITTAL** for FY 2001

Patent fees are subject to annual revision.

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Co	mplete if Known
Application Number	
Filing Date	
First Named Inventor	Morrow, et al
Examiner Name	
Group Art Unit	
Attorney Docket No.	WLI 1012 PUS

METHOD OF PAYMENT	METHOD OF PAYMENT FEE CALCULATION (continued)				tinued)	
1. The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to  3. ADDITIONAL FEES Large Entity Small Entity						
Deposit Account 50-0476	Fee Fee Code (\$)		e Fee D	Description	Fee Paid	
Number	105 130	205 65	Surcharge - late fi	ling fee or oa	ath	
Artz & Artz, P.C.	127 50	227 25	Surcharge - late p cover sheet	rovisional filir	ng fee or	
Charge Any Additional Fee Required Under 37 CFR 1 16 and 1 17	139 130	139 130	Non-English speci	fication		
Applicant claims small entity status.	147 2,520	147 2,529	) For filing a reques	st for <i>ex parte</i>	reexamination	
See 37 CFR 1 27	112 920*	112 920	<ul> <li>Requesting public Examiner action</li> </ul>	ation of SIR	prior to	
2.   ✓ Payment Enclosed:  ✓ Check Credit card Money Order Other	113 1,840*	113 1,84	.0* Requesting public Examıner action	ation of SIR	after	
FEE CALCULATION	115 110	215 55	Extension for repl	ly within first	month	
1. BASIC FILING FEE	116 390	216 195	Extension for repl	y within seco	nd month	
Large Entity Small Entity	117 890	217 445	Extension for repl	y within third	month	
Fee Fee Fee Fee Description	118 1,390	218 695	Extension for repl	y within fourt	h month	
Code (4)	128 1,890	228 945	Extension for repl	y within fifth i	month	
101 710 201 355 Utility filing fee 355	119 310	219 155	Notice of Appeal		<del></del>	
107 490 207 245 Plant filing fee	120 310	220 155	Filing a brief in su	pport of an a	ppeal	
108 710 208 355 Reissue filing fee	121 270	221 135	Request for oral h	earing		
114 150 214 75 Provisional filing fee			Petition to institute	e a public use	proceeding	
	140 110	240 55	Petition to revive -	unavoidable		
SUBTOTAL (1) (\$) 355	141 1,240	241 620	Petition to revive -	unintentiona	ıl	
2. EXTRA CLAIM FEES	142 1,240	242 620	Utility issue fee (o	r reissue)		
Fee from Extra Claims <u>below</u> <u>Fee Paid</u>	143 440	243 220	Design issue fee			
Total Claims $36 -20^{**} = 16 \times 9 = 144$	144 600	244 300	Plant issue fee			
Independent Claims $4 - 3^{**} = 1 \times 40 = 40$	122 130	122 130	Petitions to the Commissioner			
Multiple Dependent =	123 50	123 50	Petitions related to	o provisional	applications	
	126 240	126 240	Submission of Info	ormation Disc	closure Stmt	
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103 18 203 9 Claims in excess of 20	146 710	246 35	Filing a submissio (37 CFR § 1.129(	n after final r a))	ejection	
102 80 202 40 Independent claims in excess of 3  104 270 204 135 Multiple dependent claim, if not paid	149 710	249 35		al invention t		
109 80 209 40 ** Reissue independent claims	179 710	279 35	•		i l	
over original patent	169 900	169 900	Request for expe	dited examin	ation	
110 18 210 9 ** Reissue claims in excess of 20 and over original patent 109 900 109 900 Request to expended examination 109 900 for a design application						
SUBTOTAL (2) (\$) 184.00	Other fee (s	pecity)				
**or number previously paid, if greater; For Reissues, see above *Reduced by Basic Filing Fee Paid *SUBTOTAL (3) (\$)						
SUBMITTED BY Complete (if applicable)						
Name (PrintlType) John S. Artz		atıon No. ylAgent)	36,431	Telephone	(248) 223-9500	
	p mono					

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